

County of Los Angeles – Department of Mental Health
SA2 Children's QIC

August 21, 2014

Agenda

1:30 – 1:35 Introductions & Announcements

1:35 – 1:40 Review of Minutes from 6/19/14

1:40 – 2:55 Report from Departmental QI/QA.....Michelle Rittel

QI

- Provider Directory
- MHSIP Survey Update
- EQRO Final Report
- Clinical QI/OMD
- Cultural Competency
- PRO
- SRTS
- Online Capacity List

QA

- IBHIS Update
- Medi-Cal Certification Section (Previously Program Review)
- QA Technical Assistance

2:55 – 3:25 QA Procedure PresentationKimberly Hirano, Penny Lane

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Next Meeting:

Thursday, October 16, 2014

Location: TBA

**LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH
Service Area 2 Children's QIC Meeting
QUALITY IMPROVEMENT COMMITTEE MINUTES**

Type of Meeting	SA 2 Children's QIC	Date	August 21, 2014
Place	Child and Family Guidance Center	Start Time	1:30pm
Chairperson	Michelle Rittel	End Time:	3:30pm
Co-Chairs	Alex Medina and Angela Kahn		
Members Present	Deborah Hoffman, Judy Shwartz, Angela Kahn, Amanda Larson, Crystal Cianfrini-Perry, Danielle Price, Erica Louie, Eva Carrera, Colin Xie, James Randall, Kameelah Wilkerson, Kathleen Kim, Kimberly Hirano, Marietta Watson, Michelle Rittel, Sara Pineda, Sonia Herten-Greaven, Tara Iglesias, Terra Mulcahy, Tim Petersen, Vera Gisis, Vicky Shabanzadeh, Hrug Ghazarian, Allen Pouravanes, Kristin Malka, Jennifer Phan, Evelyn Vega-Aguilar		
Absent Members	Agueda Cabrera, Anabel Aispuro, Audra Casabella, Bryan Sawsville, Deanna Park, Dennis Brotman, Frank Sanchez, Genevieve Morgan, Hosun Kwon, Keith Star, Kim Farnham, Kristin Harkins, Maria Asadourian, Marisa Martinez, Mark Rodriguez, Mary Crosby, Michele Linden, Nancy Tarin, Olga Zysman, Seth Bricklin, Seon Ji Park, Soltana Nosrati, Tiger Doan,		
Agenda Item & Presenter	Discussion and Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
Call to Order Introductions and Announcements: Michelle Rittel	Meeting called to order at 1:30pm. Thank you to Child and Family Guidance Center for hosting our meeting. Jim Randall passed out a flyer for Ask the Psychiatrist Night in Spanish. He asked everyone to pass along information to their clients. The event will be at Child and Family Guidance in Northridge on Monday, August 25, 2014 6:30-8:30pm.		
Review of Minutes: Michelle Rittel	Minutes from 6/19/14 meeting were reviewed and approved.		

Agenda Items & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
<p align="center">Quality Improvement (QI)</p>			
<p>Departmental QIC Meeting Report: Michelle Rittel</p>	<p>Provider Directory: Not enough providers are completing the Culture section in the Provider Directory. Please review your entries in the Provider Directory and make updates to the Culture section as needed. The handout at our last meeting with the definition and examples of Cultural Considerations could be helpful in completing the section and indicating any culturally specific services offered by your agency.</p> <p>MHSIP Survey Update: The report from August 2013 is finished. It has not been posted online yet, but will be soon. Also the data from the April 2014 survey period has been scanned by the state and the forms are being sent back, so we hope to have some information on that soon.</p> <p>EQRO Final Report: The link to the Final Report was sent to everyone by email. There is a handout today of some specific issues from the report that are relevant to QIC. APS/EQRO was here in April for their review. There were a number of recommendations from the FY 2012-13 report and those were reviewed this year to see if improvements have been made. One of those was to examine the feasibility of modifying the QI Division and Program Support Bureau structure so that HQ staff are empowered to facilitate and direct both system wide and Service Area specific QI/Performance Management efforts and projects. This was fully addressed, specifically by having a DMH QI representative attending our SA QIC meetings, Mary Crosby, who is able to address issues in our meetings as they come up and is our primary contact in DMH QI. The report also specifically addressed the presentations from Patients' Rights Office (PRO) regarding Beneficiary Grievances,</p>	<p>Providers are encouraged to review the entire APS/EQRO report online. The link was emailed to everyone previously.</p>	

**Departmental QIC
Meeting Report,
contd.: Michelle
Rittel**

Change of Provider Requests and Notice of Actions to improve overall provider knowledge and to ensure providers take timely and appropriate actions related to these issues, which has resulted in an increase in providers reporting Change of Provider Requests, as required. Our QIC has had our presentation recently and there has been an improvement with the providers in SA2. All providers are encouraged to turn in any missing logs for this year as soon as possible, as they are due to PRO by August 29, 2014. APS/EQRO was also recommending that the SA QICs discuss the difference between QI and QA and to make sure those issues are clearly defined during our meetings. SA2 Children's QIC has been doing this for some time, by listing issues as QI or QA on our agendas and in our minutes.

During this year's review, under the heading of Quality, all components on the report are listed as present. Again, the entire report is available online, which is a much more comprehensive description of this year's review. Conclusions from the report included Strengths and Opportunities for Improvement. And finally there is a list of Recommendations in the areas of access, timeliness, outcomes, quality, information systems, or others that apply. Specific recommendations are available on the handout and online for review.

Clinical QI/OMD: There are 8 revised parameters online and they are listed with their update dates. Please review these updated parameters and make your staff aware of them. The Duty to Warn parameter is with Compliance for review. There is a work group being formed for a new parameter for Engagement of Clients At Risk For Suicide. Under Peer Review, there are some preliminary results. They are looking at the presence of a BMI for clients on anti-psychotic medications. They found that 34% have a BMI. Not all clinics have the equipment to do those measurements and IBHIS will be able to calculate BMI from measurements that are input. Outpatient Medication Consent needs to be dated in the past 12 months.

**Departmental QIC
Meeting Report,
contd. : Michelle
Rittel**

72% of clients have all meds listed. 69-70% are dated within the past 12 months. Safety Intelligence (SI) is the online incident reporting system. It should be available for Directly Operated in October and for Contract Providers it will be starting after that.

Cultural Competency: We will be having a representative from the Cultural Competency Committee (CCC) at our meetings, but they were unable to attend today. The CCC meeting schedule was handed out. Pages 10-11 of the Org. Manual, which address documentation procedures as they relate to cultural and linguistic information, were handed out and reviewed. QA Bulletin 14-03 regarding the SRTS was handed out and discussed as it means that providers no longer need to submit the Initial Requests and Referrals Log for Language and Culture Specific MH Services to the Cultural Competency Unit.

PRO: Current Local MHP posters are available to pick up at the end of the meeting. The posters are being revamped and they are adding culturally specific services. There will also be a second poster regarding informing materials in threshold languages. Both will come out together, possibly by the end of the year. PRO is doing unannounced clinic visits and informing QIC Chairs afterward. Then they do a 2 week follow up for corrections. PRO is also going out with Recertification. Please make sure your Request for Change of Provider Logs are submitted by the 10th of the following month, so August Logs will be due by October 10.

SRTS: SRTS needs to be used for all referrals once you are on the system. Please refer the QA Bulletin that was handed out today. Also, FSP will be on SRTS soon.

Online Capacity List: This was previously the Weekly Wait List. Please make sure that your designated staff is updating the list as needed and that the SRTS is being used for referrals to other providers when there is a waitlist.

Providers need to make sure all of their provider numbers have been added to SRTS.

If want to be added to access the list, email Colin Xie at fxie@dmh.lacounty.gov and request to be added.

Agenda Items & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
<p>Departmental QA Meeting Report: Michelle Rittel</p>	<p>Announcement: The Org Manual and Documentation Trainings scheduled for 8/25/14 have been moved to St. Anne's.</p> <p>IBHIS Update: Clinic Process Timeline Targets were handed out. These are for Directly Operated programs for IBHIS. Regarding Axis III, Directly Operated programs need to leave this empty on IBHIS unless there is a confirmed diagnosis. There is no way in IBHIS to say "Per client report" in the Axis III section, you must use a code. You can use the General Medical Condition field on the Dx form to record what the client reported. Contractors must develop their own policies regarding Axis III. The IBHIS Addendum Guide to Procedure Codes is going to be posted, along with a Bulletin, in the next couple of weeks.</p> <p>Medi-Cal Certification Section (Previously Program Review): Medi-Cal Certification Section is now posting Bulletins on the QA site. School Based MH Certification is for sites where there is consistent staffing. These are not really "field" services because staff are there regularly. This is starting in SA4. Regarding notification of provider site moves, providers are reminded that they need to notify their Lead District Chief so Certification can make sure there is fire clearance, etc. If you notify after the move, your claims won't be reimbursed. Regarding Beneficiary Informing Materials, in some agencies, they are not being replenished when they run out and Local MHP posters are not being replaced as needed. Medi-Cal</p>		

**Departmental QA
Meeting Report,
cont.:**

Michelle Rittel

Certification Section is going with PRO on recent visits. Clients need to be able to access information without having to ask. Materials need to be in waiting areas or other areas where clients are as needed. You should have informing materials for all the threshold languages your agency says that it serves.

QA Technical Assistance: The interim time frame for Directly Operated programs is now 15 Business Days. Managed care has a law requiring services within 10 Business Days and we are moving closer to that. Regarding claiming for report writing, the state has said that filling out SSI paperwork is not reimbursable. Report writing, if it is something you would do no matter what and doesn't need to be requested, is reimbursable. But if it is a request, it is not reimbursable. Essentially, report writing is not billable and there will be a bulletin coming out. Finally, DMH QA is working on revising Chapter 4 of the Org. Manual, which covers Day Tx/Day Rehab, Crisis Stabilization, Socialization and Vocational Services. There will be a draft next month.

**QA Presentation –
QA Procedures at
Penny Lane –
Kimberly Hirano**

QA/QI staff from both Penny Lane sites in SA2 presented on the QA procedures at their agency. Each site has a QI supervisor who supervises the QA staff. Clinical supervisors review paperwork for clinical content and then pass it on to QA staff for review of technical content, such as dates, signatures, etc. They also track cycle dates and send reminders to staff when paperwork is due. They also have Utilization Review Analysts who do reviews of every chart every 6 months, using a QA tool, looking at the "big picture", such as the Clinical Loop. Error correction/feedback procedures were discussed. Differences and similarities with other agencies were also discussed.

Agenda Items & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
Suggested Items for Next Meeting:	<p>There was a request for further training/information regarding SRTS.</p>		
Handouts:	<p>CA/EQRO FY 13-14 Review Findings (selections from full report)</p> <p>Cultural Competency Committee 2014 Meeting Schedule</p> <p>General Documentation Rules from Org. Manual (Pages 10-11)</p> <p>QA Bulletin 14-03 – Service Request Log Updates: Using the Service Request Tracking System</p> <p>Clinic Process Timeline Targets – For Directly Operated ONLY</p> <p>Ask The Psychiatrist Night Flyer (in Spanish)</p>		

Agenda Items & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
NEXT MEETING:	Thursday, October 16, 2014 1:30-3:30pm The Village Family Services 3736 Laurel Canyon Blvd. North Hollywood, CA 91606		

Respectfully submitted,



Michelle Rittel, LCSW